

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MW		11-08-01
O.I.P.E. CLASSIFIER		42	11/15/01
FORMALITY REVIEW	WKE	525	11/23/01
RESPONSE FORMALITY REVIEW	AM	917	01-03-02

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	5911
20	24513
21	020303
22	+
23	+
24	+
25	+
26	+
27	+
28	+
29	+
30	+
31	+
32	+
33	+
34	+
35	+
36	+
37	+
38	+
39	+
40	+
41	+
42	+
43	+
44	+
45	+
46	+
47	+
48	+
49	+
50	+

Claim	Date
Final Original	5911
22	24513
23	020303
51	+
52	+
53	+
54	+
55	+
56	+
57	+
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59	+
60	+
61	+
62	+
63	+
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100	+

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
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